

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☒ Important Company Notes:

2920 days is equivalent to 8 years.

**Elimination Periods**

☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ Important Company Notes

Also available are 3% and 4% compound inflation options. The Maximum Daily Benefit Amount and the Maximum Benefit Amount per claim episode are increased each policy anniversary by the selected inflation option without regard to claims paid. Premiums remain level.

**Nursing Home Daily Benefit Amounts**

\$40 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

☒ per day      ☐ per week      ☐ per month

☐ Not Available

☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

Premiums waived after 90 days of receiving covered services, regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any attached riders and spouse's premium if covered under the same policy.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$284	\$777	\$258	\$708		\$386	\$1,147	
55	\$374	\$999	\$341	\$910		\$514	\$1,456	
60	\$550	\$1,332	\$501	\$1,213		\$755	\$1,930	
65	\$868	\$1,845	\$790	\$1,681		\$1,189	\$2,664	
70	\$1,469	\$2,698	\$1,338	\$2,458		\$2,024	\$3,894	
75	\$2,517	\$4,047	\$2,294	\$3,687		\$3,422	\$5,725	
80	\$4,128	\$6,161	\$3,761	\$5,614		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☐ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ Important Company Notes  
*Simple 5%, Compound 5%*

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$1.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available

☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

Waiver of premium applies once the elimination period has been satisfied.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$300	\$630	\$210	\$460		\$350	\$790	
55	\$370	\$790	\$270	\$580		\$470	\$1,040	
60	\$600	\$1,190	\$460	\$910		\$780	\$1,640	
65	\$990	\$1,920	\$790	\$1,530		\$1,390	\$2,810	
70	\$1,610	\$2,920	\$1,250	\$2,250		\$2,210	\$4,160	
75	\$2,660	\$4,240	\$2,050	\$3,290		\$3,600	\$6,070	
80	\$4,320	\$6,180	\$3,350	\$4,800		\$5,970	\$8,790	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☒ Important Company Notes:

Contact company for more details.

### Elimination Periods

- ☒ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$5.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available

☒ Important Company Notes:

Contact company for more details

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

### Waiver of Premium

Premiums waived after 91 consecutive service days.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit		90 Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$214	\$441	\$192	\$395	\$315	\$649
55	\$268	\$553	\$240	\$495	\$395	\$815
60	\$410	\$843	\$367	\$754	\$559	\$1,149
65	\$678	\$1,316	\$607	\$1,178	\$817	\$1,586
70	\$1,241	\$2,208	\$1,111	\$1,977	\$1,366	\$2,431
75	\$2,360	\$3,729	\$2,114	\$3,340	\$2,466	\$3,897
80	Not Available	Not Available	Not Available	Not Available	Not Available	\$0

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

### Elimination Periods

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

### Inflation Protection

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☒ Important Company Notes  
*5% compound increase rider increases Daily Benefit by 5% compounded annually*

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%    ☐ 75%  
☒ 100%    ☐ 90%  
☐ 70%    ☐ Important Company Notes

### Waiver of Premium

After confinement in a Nursing Facility or Residential Care Facility for a period of 60 days; days need not be consecutive.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$208	\$530	\$189	\$482		\$270	\$689	
55	\$277	\$582	\$252	\$529		\$360	\$756	
60	\$416	\$665	\$378	\$605		\$540	\$864	
65	\$647	\$970	\$588	\$882		\$840	\$1,260	
70	\$1,109	\$1,552	\$1,008	\$1,411		\$1,440	\$2,016	
75	\$1,802	\$2,342	\$1,638	\$2,129		\$2,340	\$3,042	
80	\$3,188	\$3,985	\$2,898	\$3,622		\$4,140	\$5,175	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

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**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☐ 5 Yrs.    ☒ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☒ 5% Simple    ☒ Important Company Notes  
*5% compound, increases Daily/Maximum benefit by 5% compounded annually. 5% simple increases original daily benefit by 5% annually*

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%    ☐ 75%  
☒ 100%    ☐ 90%  
☐ 70%    ☐ Important Company Notes

**Waiver of Premium**

provided after confinement in a Nursing Facility or Residential Care Facility for a period of 90 days, need not be consecutive days.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$249	\$746	\$216	\$649		\$333	\$998	
55	\$311	\$840	\$270	\$730		\$416	\$1,123	
60	\$392	\$922	\$341	\$802		\$525	\$1,233	
65	\$631	\$1,263	\$549	\$1,098		\$845	\$1,690	
70	\$1,100	\$1,904	\$957	\$1,655		\$1,472	\$2,547	
75	\$1,914	\$3,062	\$1,664	\$2,662		\$2,560	\$4,096	
80	\$3,444	\$5,167	\$2,995	\$4,493		\$4,608	\$6,912	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

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### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☒ 7 Yrs.      ☒ Lifetime  
☐ Important Company Notes:

### Elimination Periods

- ☐ 0 days      ☐ 60 days      **TYPE**  
☒ 20 days      ☐ 90 days      ☐ Calendar Day  
☐ 30 days      ☒ 100 days      ☒ Service Day

### Inflation Protection

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$90 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available  
☐ Important Company Notes:

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☒ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☒ Important Company Notes

50% also available, contact company for more details.

### Waiver of Premium

Takes effect upon benefit eligibility (after elimination period is satisfied).

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

20* Day Elimination Period. 3 year maximum policy benefit			100** Day Elimination Period. 3 year maximum policy benefit			100** Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$241	\$544	\$209	\$473		\$338	\$763	
55	\$354	\$745	\$290	\$648		\$487	\$1,087	
60	\$504	\$1,064	\$438	\$925		\$757	\$1,598	
65	\$854	\$1,599	\$743	\$1,391		\$1,230	\$2,303	
70	\$1,573	\$2,585	\$1,368	\$2,248		\$2,183	\$3,587	
75	\$2,685	\$3,952	\$2,335	\$336		\$4,138	\$6,090	
80	\$4,444	\$5,927	\$3,865	\$5,154		Not Available	Not Available	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

[\*\* Carrier does not offer a 90-day elimination period.]

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☒ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

### Elimination Periods

- ☐ 0 days    ☐ 60 days    ☐ TYPE  
☒ 20 days    ☒ 90 days    ☐ Calendar Day  
☐ 30 days    ☐ 100 days    ☒ Service Day

### Inflation Protection

- ☒ 5% Compound    ☒ Guaranteed Purchase Option  
☒ 5% Simple    ☒ Important Company Notes

There are 7 automatic annual inflation options: Simple 1%, Simple 2%, Simple 3%, Simple 4%, Simple 5%, Simple 6%, and Compound 5%. If the policyholder doesn't choose one of the 7 automatic inflation options listed in the Notes below, then he will receive an offer every year to purchase an additional 5% of coverage at attained age rates without underwriting. The offers stop after the policyholder has rejected 4 of them.

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%    ☐ 75%  
☒ 100%    ☐ 90%  
☐ 70%    ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

### Waiver of Premium

If the optional Enhancement rider is attached to the policy, then premiums are waived as soon as benefits are paid under the Nursing Home or Home Care benefit. If the rider is not attached, then premiums are waived once benefits have been paid for 90 days for Nursing Home or Home Care service. This requirement must be satisfied once for each period of care.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

20* Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit		90 Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$244	\$673	\$200	\$551	\$296	\$848
55	\$376	\$934	\$308	\$766	\$453	\$1,173
60	\$525	\$1,200	\$430	\$984	\$630	\$1,498
65	\$797	\$1,632	\$653	\$1,338	\$949	\$2,023
70	\$1,268	\$2,302	\$1,040	\$1,887	\$1,498	\$2,842
75	\$2,108	\$3,414	\$1,728	\$2,798	\$2,484	\$4,206
80	\$3,318	\$4,835	\$2,720	\$3,963	\$3,892	\$5,885

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☒ 5% Simple    ☒ Important Company Notes  
*Optional 5% simple increase rider, increases original daily benefit by 5% annually, optional 5% compound increase rider increases daily maximum by 5% compounded annually*

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

- Represents the percentage of the Nursing Home Daily Benefit Amount.
- ☐ 80%    ☐ 75%  
☒ 100%    ☐ 90%  
☐ 70%    ☐ Important Company Notes

**Waiver of Premium**

Provided after confinement in a nursing facility or residential care facility for a period of 90 days, days need not be consecutive.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$206	\$464	\$179	\$404		\$276	\$621	
55	\$251	\$502	\$218	\$437		\$336	\$672	
60	\$323	\$565	\$281	\$491		\$432	\$756	
65	\$610	\$915	\$530	\$796		\$816	\$1,224	
70	\$1,041	\$1,509	\$905	\$1,312		\$1,392	\$2,018	
75	\$1,650	\$2,311	\$1,435	\$2,009		\$2,208	\$3,091	
80	\$3,086	\$4,166	\$2,683	\$3,622		\$4,128	\$5,573	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.



This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☒ Important Company Notes:

2920 days is equivalent to 8 years

**Elimination Periods**

☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ Important Company Notes

Also available are 3% and 4% compound inflation options. The Maximum Daily Benefit Amount and the Maximum Benefit Amount per claim episode are increased each policy anniversary by the selected inflation option without regard to claims paid. Premiums remain level.

**Nursing Home Daily Benefit Amounts**

\$40 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

☒ per day      ☐ per week      ☐ per month

☐ Not Available

☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

Premiums waived after 90 days of receiving covered services, regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any attached riders and spouse's premium if covered under the same policy.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$289	\$792	\$264	\$722		\$393	\$1,170	
55	\$382	\$1,019	\$348	\$928		\$524	\$1,485	
60	\$561	\$1,358	\$511	\$1,237		\$770	\$1,969	
65	\$885	\$1,882	\$806	\$1,715		\$1,213	\$2,717	
70	\$1,498	\$2,752	\$1,365	\$2,507		\$2,065	\$3,972	
75	\$2,568	\$4,128	\$2,340	\$3,761		\$3,490	\$5,840	
80	\$4,210	\$6,284	\$3,836	\$5,726		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

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**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☒ 7 Yrs.      ☐ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$350 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available  
☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

Waived following 90 consecutive days of nursing facility confinement.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	Not Available	Not Available	Not Available	Not Available		Not Available	Not Available
55	\$332	\$737	\$302	\$670		\$503	\$1,221
60	\$497	\$1,051	\$452	\$955		\$782	\$1,748
65	\$798	\$1,533	\$726	\$1,393		\$1,214	\$2,303
70	\$1,372	\$2,523	\$1,247	\$2,294		\$2,024	\$3,457
75	\$2,076	\$3,441	\$1,888	\$3,129		\$3,416	\$5,850
80	\$3,168	\$4,682	\$2,880	\$4,257		\$5,680	\$8,314

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Non-Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☒ Important Company Notes:

Contact company for more details.

### Elimination Periods

- ☒ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$5.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available

☒ Important Company Notes:

Contact company for more details

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

### Waiver of Premium

Premiums waived after 91 consecutive service days.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$225	\$463	\$201	\$414		\$331	\$682
55	\$282	\$582	\$252	\$520		\$414	\$854
60	\$430	\$884	\$385	\$791		\$587	\$1,207
65	\$712	\$1,382	\$638	\$1,238		\$857	\$1,663
70	\$1,303	\$2,319	\$1,167	\$2,077		\$1,434	\$2,552
75	\$2,478	\$3,915	\$2,219	\$3,506		\$2,589	\$4,091
80	Not Available	Not Available	Not Available	Not Available		Not Available	\$0

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☒ Important Company Notes  
*Explain: methodology here: 5% compound increase rider increases Daily Benefit by 5% compounded annually*

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

- Represents the percentage of the Nursing Home Daily Benefit Amount.
- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ Important Company Notes

**Waiver of Premium**

After confinement in a Nursing Facility or Residential Care Facility for a period of 60 days; days need not be consecutive.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$208	\$530	\$189	\$482		\$270	\$689	
55	\$277	\$582	\$252	\$529		\$360	\$756	
60	\$416	\$665	\$378	\$605		\$540	\$864	
65	\$647	\$970	\$588	\$882		\$840	\$1,260	
70	\$1,109	\$1,552	\$1,008	\$1,411		\$1,440	\$2,016	
75	\$1,802	\$2,342	\$1,638	\$2,129		\$2,340	\$3,042	
80	\$3,188	\$3,985	\$2,898	\$3,622		\$4,140	\$5,175	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Non-Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ Important Company Notes:

### Elimination Periods

- ☐ 0 days      ☐ 60 days      **TYPE**  
☒ 20 days      ☒ 90 days      ☐ Calendar Day  
☐ 30 days      ☐ 100 days      ☒ Service Day

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☒ Important Company Notes

There are 7 automatic annual inflation options: Simple 1%, Simple 2%, Simple 3%, Simple 4%, Simple 5%, Simple 6%, and Compound 5%. If the policyholder doesn't choose one of the 7 automatic inflation options listed in the Notes below, then he will receive an offer every year to purchase an additional 5% of coverage at attained age rates without underwriting. The offers stop after the policyholder has rejected 4 of them.

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available  
☐ Important Company Notes:

### Waiver of Premium

If the optional Enhancement rider is attached to the policy, then premiums are waived as soon as benefits are paid under the Nursing Home or Home Care benefit. If the rider is not attached, then premiums are waived once benefits have been paid for 90 days for Nursing Home or Home Care service. This requirement must be satisfied once for each period of care.

**Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.**

20* Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit		90 Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$244	\$673	\$200	\$551	\$296	\$848
55	\$376	\$934	\$308	\$766	\$453	\$1,173
60	\$525	\$1,200	\$430	\$984	\$630	\$1,498
65	\$797	\$1,632	\$653	\$1,338	\$949	\$2,023
70	\$1,268	\$2,302	\$1,040	\$1,887	\$1,498	\$2,842
75	\$2,108	\$3,414	\$1,728	\$2,798	\$2,484	\$4,206
80	\$3,318	\$4,835	\$2,720	\$3,963	\$3,892	\$5,885

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]